


**Biggers & Ohanian, LLP****Patent Attorneys**P.O. Box 1469  
Austin, Texas 78767-1469  
(512) 472-9881  
cathy@biggerslaw.com**RECEIVED**  
**CENTRAL FAX CENTER****MAY 25 2006****FACSIMILE TRANSMITTAL SHEET****DATE:** 5/25/2006**TO:** Mail Box: AF  
Examiner Lezak Group Art Unit: 2143**COMPANY:** United States Patent and Trademark Office**FACSIMILE NO:** 571-273-8300**FROM:** H. Artoush Ohanian, Reg. No. 46,022**RE:** Notice of Appeal to Final OA  
dated March 21, 2006; Title:  
"Dynamic Current Device Status" Atty. Docket No.: AUS920010853US1  
(028)**SERIAL NO.:** 10/047,018 Customer No. 34533**NUMBER OF  
PAGES:** (Including Cover) 4**COMMENTS:** Please see attached.Certificate of Transmission by Facsimile under 37 C.F.R. 1.8

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PTO/SB/21 (02-04)

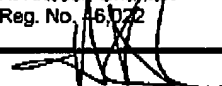
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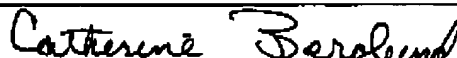
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<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/047,018	<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b>
	Filing Date	01/15/2002	
	First Named Inventor	William K. Bodin	<b>MAY 25 2006</b>
	Art Unit	2143	
	Examiner Name	Lezak, Arianne M.	
Total Number of Pages in This Submission	4	Attorney Docket Number	AUS920010853US1

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input checked="" type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Facsimile Transmittal Sheet; Notice of Appeal PTO/SB/31 (2 Originals).
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	H. Antoush Ohanian Reg. No. 46,022
Signature	
Date	May 25, 2006

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Date	May 25, 2006

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		Application Number <b>10/047,018</b>	Filed <b>01/15/2002</b>
		For DYNAMIC CURRENT DEVICE STATUS	
		Art Unit <b>2143</b>	Examiner <b>Lezak, Arrienne M.</b>
Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner.			
The fee for this Notice of Appeal is (37 CFR 41.20(b)(1))		\$ <u>500.00</u>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:		\$ _____	
<input type="checkbox"/> A check in the amount of the fee is enclosed.		05/26/2006 STEUHEL1 00000024 090447 1004701	
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.		01 FC:1401 500.00 DA	
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>09-0447</u> . I have enclosed a duplicate copy of this sheet.			
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<b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>			
I am the			
<input type="checkbox"/> applicant/inventor.		Signature	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)		H. Artoush Ohanian	
		Typed or printed name	
<input checked="" type="checkbox"/> attorney or agent of record. <u>46,022</u>		512-472-9881	
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<input type="checkbox"/> attorney or agent acting under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34. _____		May 25, 2006	
		Date	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
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